(b) if so, whether Government have conducted any study to confirm this report;

(c) if so, the results thereof; and

(d) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) According to Indian Council of Medical Research (ICMR), the World Health Organization (WHO) is conducting research through international agency to identify links between use of mobile phones and its ill effects. However, according to published literature of WHO and other agencies, there is no conclusive evidence of adverse health effect of use of mobile phones on human beings.

Leprosy in India

554. SHRI C. RAMACHANDRAIAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that according to the report of WHO, Leprosy has completely been eliminated globally except India;

(b) if so, the details thereof; and

(c) the plans of Government to eliminate leprosy through the active participation of NGOs and Central Leprosy Teaching and Research Institute?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Elimination of leprosy is yet to be achieved in eight countries including India. However, India is making satisfactory progress towards achieving the goal of national elimination by December, 2005. The prevalence rate (PR) has come down from 57.6/10,000 in 1981 to 1.96 by the end of December, 2004. So far, 19 States/UTs have achieved elimination and another six States are close (PR 1-2/10,000) to achieve elimination.

(c) The Government proposer to eliminate leprosy through the existing health care infrastructure and the active participation of NGOs and Research Institutes set up for the purpose. With the integration of leprosy services

with General Health Care services, free health care for leprosy are available at all primary health centres and Government hospitals and dispensaries. This includes diagnosis and supply of anti-leprosy drugs. The NGOs are involved in creating public awareness and providing support in the prevention of deformities and rehabilitation. The Central Leprosy Teaching and Research Institute mainly acts as referral centre for complicated cases. It is also involved in operational research and training.

Measures to check epidemics in Tsunami affected areas

555. SHRI RAJKUMAR DHOOT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Tsunami toll in December, 2004 in coastal areas has resulted in fears of epidemic for persons living in the areas;

(b) if so, the steps taken by Government to check it and protect the people living in those areas;

(c) whether any foreign help was also sought for the purpose; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) There were no reports of outbreak of diseases in the Tsunami affected areas. Epidemiologists and public health specialists from premier public health institutions visited Tsunami affected areas, reviewed disease surveillance measures and monitored potential outbreaks. A central surveillance unit has been established at Port Blair with six peripheral units in the affected islands for intensive monitoring of the post tsunami public health situation and to take appropriate measures as and when necessary. Another Tsunami Disease Surveillance Unit has been set up in JIPMER, Pondicherry for surveillance in the affected coastal belts of Pondicherry and Tamil Nadu. Apart from health manpower deployment, adequate emergency medical stores (drugs, consumables, disinfectants, insecticides) have been supplied to the affected States/Union Territories.

The Central Government in coordination with affected States provided emergency medical relief and taken public health measures and no foreign help was sought for the purpose.